440 000 1/01/2000, CMB VOO 1-0003 U.S. Peleri and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Expensive Reduction Act of 1996, no persons are required to respond to a collection of information unique & displays a walld CMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application of Docket Humber Substitute for Form PTO-875 Effective December 8, 2004 006 APPLICATION AS FILED - PART I OTHER THAN (Column 1). SMALL ENTITY OR (Column 2). SMALL ENTITY FÖR NUMBER FILED NUMBER EXTRA RATE (1) ASIC FEE 17 CFR 1 18(0) [b] & [c]] FEE G RATE AL FEE (1) NIA f#A 150.00 N/A 300,00 EARCH FEE NVA NIA 17 CFR 1 16(N. 14. 0 (m)) NA \$250. NIA \$600 XAMILLATION FEE N/A NA 17 CFR 1 18101. WI. or 1011 N/A \$100 \$200 NA DTAL CLAMS DER (1601) . • X\$ 25 mvnus 20 = X\$50 OR DEPENDENT CLAIMS X100 17 CFR 1 16(N) minus 3 X200 If the specification and drawings exceed 100 PPLICATION SIZE sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each F OFR 1 16(4)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1:16(s) +180= ULTIPLE DEPENDENT CLAIM PRESENT OF CFR 1 16(1) +360= I the difference in column 1 is less than zero, enter "O" in column 2. TOTAL TOTAL . APPUCATION AS AMENDED - PART II OTHER THAN OR (Column 1) (Column 2) (Column 3): SMALL ENTITY . SMALL ENTITY CILIUS HIGHEST REMAINING PRESENT NUMBER RATE (1) ADDI-W RATE (\$) ADOI-10 AFTER **EXTRA PREVIOUSLY** TIONAL AMENDMENT TIONAL PAID FOR FEE (1) FEE (1) Tool વેત્રે Minus CH CHA LINE X\$ 25 X\$50 OR Minus X100 X200 * **QR** Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (DT CFR 1.160) 4180= 4360s OR TOTAL TOTAL ADD'L FEE ADD'L FE (Cotumn 1) (Column 7) (Column 3) CLAMS HIGHEST REMAINING PRESENT NUMBER RATE (1) ADDI-RATE (\$) ADOI-AFTER. EXTRA PREVIOUSLY TIONAL TIONAL AMENDMENT PAID FOR FEE (1) FEE (\$) Total Grant Minus X\$ 25 X\$50 OR Minus G7 CFR £160 X100 X200-OR Application Stre Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MALTURE DEPENDENT CLAIM (37 OFR 1.160) +180= +360= OR TOTAL TOTAL OR ADD1 FEE ADD'L FEE

If the entry in column 1 is less than the entry in column 2, write "o" in column 3.

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If the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter 20".

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The Highest Number Previously Paid ng gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments amount of time you require to complete this form and/or suggestions for enducing this burden, should be sent to the Chiefinfarmation Officer, U.S. Pedent Idemark Office, U.S. Department of Commerce, P.D. Box 1450, Alexandria, VA 22313-1450; DO NOT SEND FEES OR COMPLETED FORMS TO THIS 1865. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.